

13

ANNUAL
MEDICAL REPORT



OF THE

KENT COUNTY LUNATIC ASYLUM,

For the Year ending July 4th, 1853,

PRESENTED BY

D. Huxley

PRESENTED TO THE COMMITTEE OF VISITORS,

September 10, 1853.

AND TO THE COURT OF GENERAL SESSIONS,

October 18, 1853,

MAIDSTONE:

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1853.

CONTENTS.

STATISTICAL TABLES :—

	PAGE
General (Nos. 1 to 3)	1
Admissions of the Year (Nos. 4 to 11)	6
Recoveries of the Year (Nos. 12 to 14)	12
Deaths of the Year (Nos. 15 to 18)	13
Return of Lunacy in the County (No. 19)	18
Remarks on the Tables	17
State of the Asylum, and occurrences of the Year	22



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STATISTICAL TABLES.

TABLE (1).

OF ALL THE

ADMISSIONS, DEATHS AND DISCHARGES.

—	Admitted.			Died.			Discharged Recovered.			Discharged Relieved.			Discharged not Improved.			Total Discharged.			Remaining.		
	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total
From the opening on 1st Jan., 1833, to 4th July, 1852.	938	901	1839	349	240	589	278	245	523	17	40	57	58	80	138	702	605	1307	236	296	532
During the last year, from July 5, 1852, to July 4, 1853.	84	87	171	25	30	55	38	26	64	5	11	16	8	15	23	76	82	158			
Totals	1022	988	2010	374	270	644	316	271	587	22	51	73	66	95	161	778	687	1465	244	301	545

TABLE II.

Admissions of all Years and Remainders.

Years.		All Annual Admissions.	1853.—Remainders of all Annual Admissions, and the Proportions borne by the former to the latter.					Quotas of all Annual Admissions to Discharges of the last Year (1852-3.)					Shows the aggregate re- mainder from Admis- sions down to any Year.	
								Recovered.	Relieved.	Not Im- proved.	Dead.	Total.		
1st	1833	126	24 being 19·0 pr. ct. after 20 yrs.					...	...	...	...	...	24	
2nd	1834	68	12	„	17·6	„	19	„	...	...	...	1	1	36
3rd	1835	60	7	„	11·6	„	18	„	...	...	2	...	2	43
4th	1836	56	4	„	7·1	„	17	„	...	...	...	1	1	47
5th	1837	43	6	„	14·0	„	16	„	...	...	...	...	...	53
6th	1838	44	9	„	20·4	„	15	„	...	...	...	...	...	62
7th	1839	54	8	„	14·8	„	14	„	...	..	...	..	...	70
8th	1840	38	7	„	18·4	„	13	„	...	...	...	..	...	77
9th	1841	41	10	„	24·4	„	12	„	...	..	...	...	...	87
10th	1842	69	14	„	20·3	„	11	„	...	...	1	...	1	101
11th	1843	86	16	„	18·6	„	10	„	...	...	...	1	1	117
12th	1844	79	13	„	16·4	„	9	„	...	...	1	...	1	130
13th	1845	113	23	„	20·3	„	8	„	...	...	...	4	4	153
14th	1846	91	15	„	16·5	„	7	„	..	...	...	...	...	168
15th	1847	103	26	„	24·0	„	6	„	...	1	...	4	5	194
16th	1848	95	22	„	23·1	„	5	„	...	...	1	...	1	216
17th	1849	116	29	„	25·0	„	4	„	...	...	1	5	6	245
18th	1850	190	37	„	19·4	„	3	„	4	6	6	3	19	282
19th	1851	248	76	„	30·6	„	2	„	10	2	10	11	33	358
20th	1852	195	105	„	53·8	„	1	„	46	6	1	22	75	463
21st(half)	1853	90	82	...	...	...	...	...	4	1	0	3	8	545
		2010	545						64	16	23	55	158	

TABLE III.
General Statement.

	M.	F.	T.	M.	F.	Total.
Remaining in the Asylum, July 4, 1852				236	296	532
Admitted in the succeeding year, Pauper... 78	87	165				
„ Private... 6	0	6		84	87	171
Total number under treatment in that year				320	383	703
Deduct number discharged and dead				76	82	158
Remaining on July 4, 1853.....				244	301	545

The number remaining consisted of,	M.	F.	
Patients of contributing parishes	187	237	} 197 248 445
Ditto charged to the County account	10	11	
Ditto of local jurisdictions in the County			30 42 72
Ditto belonging to other Counties			7 2 9
Ditto Private			10 9 19
Total			244 301 545

The daily average number of Patients resident was..... 528.5

Patients were discharged as under : —

Recovered	37	19	} 38 26 64
Ditto after a month's trial	1	7	
Relieved			5 11 16
Not improved			8 15 23
Dead			25 30 55
Total			76 82 158

Of those discharged “relieved,” and not “improved,” were
to be transferred to other Asylums 8 16 24

The Admissions comprised,

Cases of the first attack	67	60	127
Cases of repeated attack	17	27	44
Total	84	87	171
Cases of readmission into the Asylum	9	6	15

ADMISSIONS, 1852-3.

TABLE IV.—The Admissions comprised

	M.	F.	T.
Patients from contributing parishes	55	69	124
„ chargeable to the County account	3	0	3
„ chargeable to local jurisdictions in Kent	17	18	35
„ from the County of Sussex	3	0	3
„ private	6	0	6
Total.....	84	87	171

TABLE V.

Ages (last birthday) of the Patients admitted.

	Numbers.			Mean Ages, Years.	
	Males.	Females	Total.	Males.	Females.
From 10 to 20 years of age	4	3	7	17 3-4ths	15
„ 20 to 30 „	13	15	28	25 5-6ths	26 $\frac{1}{4}$
„ 30 to 40 „	31	14	45	34 1-10th	35 1-7th
„ 40 to 50 „	17	24	41	45 1-3rd	43 3-8ths
„ 50 to 60 „	8	19	27	54 1-8th	53 2-5ths
„ 60 to 70 „	4	7	11	64 $\frac{1}{2}$	64
„ 70 to 80 „	7	5	12	75 3-7ths	72 3-5ths
Total	84	87	171		

TABLE VI.
Civil condition of the Patients admitted.

MARRIAGE.				Having Children.	Number of Children.	EDUCATION.						RELIGION.											
						Able to Read and Write, &c.		Able to Read only.		None.		Established Church.		Roman Catholic.		Bap- tist.		Wesleyan.		Other Dissenters.		Episcopa- lian and Calvinist.	
	M.	F.	Total			M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Married	46	28	74	60	234	36	16	4	6	4	4	32	24	1	..	2	..	..	2	4	1	2	..
Widowed	8	13	21	17	68	6	7	..	4	2	1	6	9	..	..	1	2	..	1	..	..	..	..
Single (men)	27	..	27	..	..	19	..	3	..	2	..	20	..	1	..	1	..	..	..	1	..	..	..
” (women)	..	41	41	5	5	..	32	..	2	..	5	..	32	..	..	..	1	..	..	..	3	..	1
Not ascertained	3	5	8	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total	84	87	171	82	307	61	55	7	12	8	10	59	65	2	..	4	3	..	3	5	4	2	1

TABLE VII.—Occupations of the Patients admitted.

MEN.		WOMEN.	
Labourers	24	Domestic Servants.....	19
Carpenters, Sawyers, Ship- wrights, Cabinet Makers .. }	8	Wives, Widows, & Daughters of Labourers	15
Grocer, Miller	2	Wives, Widows, & Daughters of Mechanics	10
Sergeant, Soldier	2	Wives of Mariner & Water- man	2
Hawker, Pig dealer	2	Wives of Innkeeper and Licensed Victuallers	3
Butcher, Publican	2	Washerwomen, Laundress	3
Draper, Tailors	3	Charwoman, Nurse	2
Shoemakers	8	Dress-makers, Needlewomen ..	5
Mariners, Watermen	4	Shoebinders..	2
Watchmaker, Wheelwright	2	Schoolmistress, Teacher	2
Smiths, Boiler maker	3	Outdoor Labourers.....	2
Glover, Messenger	2	Gamekeeper's Wife	1
Gasfitter, Painter	2	Ensign's Wife.....	1
Cabdriver, Wafer maker	2	Waiter's Wife	1
Waiter, "Boots" at Inn	2	Coast-guard's Wife	1
Gardeners	2	Ship-colours Maker	1
Solicitor, Toll Collector	2	Silk Throwster	1
Grooms, Coachman	3	Turnpike Gate-keeper	1
Farmers	2	Bailiff's Widow	1
Fishmonger, Custom - house Officer	2	Gentlewoman	1
None, and not ascertained	5	None, and not ascertained	13
Total	84	Total	87

TABLE VIII.—Forms of Mental Disorder in the Patients admitted.

	M.	F.	T.
Acute Mania	31	30	61
Chronic Mania.....	7	10	17
Occasional Mania, with or without Dementia	7	4	11
Melancholia	15	24	39
Dementia	19	8	27
Mania with Imbecility or Idiocy	5	11	16
Total	84	87	171
Associated in various cases with,			
General Paralysis	7	1	8
Partial Paralysis	7	2	9
Epilepsy	9	2	11
Total	23	5	28

TABLE IX.

Prevalence of the Suicidal Propensity in the cases admitted ,
and the forms of Insanity in which it was manifested.

Suicide had been	In Mania.		In Melancholia		In Dementia		Total.		
	M.	F.	M.	F.	M.	F.	M.	F.	Total.
Attempted	6	5	7	14	1	2	14	21	35
Threatened or talked of . . .	..	8	1	1	3	1	4	10	14
Suspected to exist	3	3	4	5	1	..	8	8	16
Total	9	16	12	20	5	3	26	39	65

TABLE X.

Duration of Insanity on Admission.

	M.	F.	T.
Under 1 month	27	22	49
„ 3 months	14	21	35
„ 6 months	9	9	18
„ 1 year	5	7	12
„ 2 years	7	10	17
„ 5 years	6	10	16
Of 8, 10, 12, 15, 30, 32, and 34 years standing ...	5	5	10
Not ascertained	11	3	14
Total	84	87	171

TABLE XI.—Causes.

EXCITING CAUSES.		PREDISPOSING CAUSES acting in combination.																			
Total.		One relative Insane.		More than one relative Insane.		One former attack.		More than one former attack.		Intemperance.		Paralysis.		Previous Imbecility.		Old Age.		Brain Fever.		Excessive Lactation.	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
[NOTE.—The three first columns show the number in whom the causes below were assigned. The remaining columns show the associated causes.]	M.	5	2	7	2	1	...	1	...	...	...	...	...	...	...	...	...	1	...	...	...
	F.	2	2	4	...	...	1	...	2	...	...	...	...	...	...	...	...	...	...	...	...
	T.	2	4	6	2	1	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...
	M.	2	4	6	2	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...
	F.	5	1	6	1	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...
Intemperance	3	5	8	2	2	...	...	...	...	3	...	1	...	...	...	...	...	...	...	...	...
Trouble in affairs, loss of money, want	3	3	...	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...
Jealousy, disappointment ..	3	3	...	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...
Epilepsy, Neuralgia	3	3	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Family affliction	3	3	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Apoplexy, Paralysis	2	2	...	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...
Long illness and declining health	1	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
Anxiety, fright, watching ..	...	6	6	...	4	...	...	1	...	...	...	...	...	...	...	...	...	1	...	...	...
Parturition, lactation, &c. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total	23	23	46	10	9	4	4	6	5	3	5	...	1	...	2	...	...	1	1	1	...

[NOTE.—The three first columns show the number in whom the causes below were assigned. The remaining columns show the associated causes.]

TABLE XI—*continued.*

<i>Exciting causes only, ascertained.</i>				<i>Predisposing causes only, ascertained.</i>			
	M.	F.	T.		M.	F.	T.
Intemperance	4	2	6	One relative insane	4	6	10
Trouble in affairs	1	0	1	Ditto and former intem- } perance	2	0	2
Ditto and intemperance ..	0	1	1	Ditto and imbecility	1	2	3
Anxiety and intemperance	0	1	1	Ditto and one former } attack	1	2	3
Syphilis and intemperance	0	1	1	Ditto and paralysis	0	1	1
Epilepsy	2	1	3	More than one relative } insane	1	3	4
Apoplexy	1	0	1	Ditto and imbecility	1	2	3
Injuries	2	1	3	Ditto and one former } attack ..	1	0	1
Imprisonment and sense } of degradation	1	0	1	Ditto and old age	1	0	1
Jealousy	1	0	1	Ditto and more than one } former attack	0	2	2
Disappointment	0	2	2	One former attack	5	5	10
Loss, illness or miscon- } duct of relatives ... }	2	2	4	Ditto and former intem- } perance	2	0	2
Total	14	11	25	More than one former } attack	6	8	14
				Ditto and ill-usage for- } merly	0	1	1
				Brain fever formerly	1	0	1
				Imbecility	1	1	2
				Old age	2	1	3
				Total	29	34	63

TABLE XI—*continued.*

<i>Summary of ascertained causes of all kinds.</i>			
	M.	F.	T.
Exciting and predisposing causes, of all kinds, combined	23	23	46
Exciting causes only (ascertained)	14	11	25
Predisposing causes only (ascertained)	29	34	63
Total ascertained causes	66	68	134
No causes whatever assigned in	18	19	37
Total admissions	84	87	171

RECOVERIES.

TABLE XII.—Duration of Insanity on Admission in Cases of Recovery.

	Males.	Females	Duration, Males.			Duration, Females.		
			Shortest.	Longest.	Mean.	Shortest.	Longest.	Mean.
Acute Mania	19	13	1 week	6 months	1 $\frac{1}{6}$ month	1 week	6 months	1 $\frac{1}{2}$ month
Ditto occasional or paroxysmal	2	1	2 , ,	1 , ,	, ,	2 weeks		, ,
Ditto puerperal.....	0	2	, ,	, ,	, ,	3 weeks	1 month	, ,
Chronic Mania	1	1	24 months		, ,	15 months		, ,
Melancholia.....	11	4	1 week	3 months	1 month	1 month	12 month	5 $\frac{1}{4}$ months
Total	33	21						
Duration not ascertained	5	5						
Total recoveries	38	26						

TABLE XIII.—Periods of Residence in the Cases of Recovery.

	Males.	Females	Residence, Males.			Residence, Females.		
			Shortest.	Longest.	Mean.	Shortest.	Longest.	Mean.
Acute Mania	22	15	1½ month	25 months	8 months	1¾ month	29¼ months	8¾ months
Ditto occasional, or paroxysmal	4	2	4¼ , ,	8 , ,	6 , ,	8¾ , ,	12½ , ,	, ,
Ditto puerperal	0	2	, ,	, ,	, ,	2¾ , ,	7½ , ,	, ,
Chronic Mania	1	1	16½ months	16½ months	, ,	14 months	, ,	, ,
Melancholia.....	11	6	3 months	10 months	6, 1-12th m.	2¼ months	5½ months	3¾ months
Total	38	26						

TABLE XIV.—Forms of Insanity in the Patients who recovered.

	M.	F.	Total.
Acute Mania	22	15	37
Ditto occasional, or paroxysmal	4	2	6
Ditto puerperal	0	2	2
Chronic Mania	1	1	2
Melancholia	11	6	17
	—	—	—
Total	38	26	64

DEATHS.

TABLE XV.—Ages at Death.

Decennial Periods.	Number.			Mean Ages.	
	M.	F.	Total	Males.	Females.
From 20 to 30 years ..	5	6	11	24 $\frac{3}{5}$ years	27 $\frac{1}{2}$ years
„ 30 „ 40 „ ..	5	6	11	31 „	34 „
„ 40 „ 50 „ ..	6	4	10	45 $\frac{1}{2}$ „	46 $\frac{1}{4}$ „
„ 50 „ 60 „ ..	3	5	8	55 „	55 $\frac{2}{5}$ „
„ 60 „ 70 „ ..	3	4	7	61 $\frac{2}{3}$ „	65 $\frac{1}{2}$ „
„ 70 „ 80 „ ..	2	5	7	74 $\frac{1}{2}$ „	73 „
„ 80 „ 84 „ ..	1	0	1	84 „	..
Total	25	30	55		

TABLE XVI.—Periods of residence of those who died.

Residence.	Number.			Mean Residence.	
	M.	F.	Total	Males.	Females.
Less than 1 month	3	0	3	12 days	
From 1 to 3 months ..	3	2	5	$1\frac{2}{3}$ month	$2\frac{1}{4}$ month
„ 3 „ 6 „ ..	4	2	6	$4\frac{2}{3}$ „	5 „
„ 6 „ 12 „ ..	2	8	10	$7\frac{1}{8}$ „	$8\frac{1}{8}$ „
„ 1 „ 2 years	7	5	12	$18\frac{1}{2}$ „	$17\frac{3}{4}$ „
„ 2 „ 3 „	2	2	4	$31\frac{1}{4}$ „	34 „
„ 3 „ 5 „	0	5	5	..	$46\frac{1}{2}$ „
„ 5 „ 10 „	3	5	8	$99\frac{1}{2}$ months	$71\frac{1}{5}$ „
17 and 19 „	1	1	2	$228\frac{1}{4}$ „	$200\frac{3}{4}$ „
Total	25	30	55		

TABLE XVII.—Forms of Insanity in those who died.

	M.	F.	Total.
Acute Mania	3	1	4
Chronic ditto	1	7	8
Melancholia	0	4	4
Dementia	16	10	26
Senile Imbecility	4	6	10
Idiocy	1	2	3
	—	—	—
Total	25	30	55

TABLE XVIII.—Causes of the Deaths.

Immediate Causes.	Remote Causes acting in Combination.																			
	Total.		Epilepsy.		General Paralysis.		Partial Paralysis.		Senile Mania.		Acute Mania.		Pulmonary Consumption.		Cerebral Softening.		Cerebral Tumour.		Chronic Dysentery.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Apoplexy	6	5	4	4	2	..	2	1	..	..	..	..	..	..	..	2	..	1	..	..
Epilepsy.....	5	2	..	..	1	..	4	..	..	..	..	..	..	..	..	..	..	..	..	..
General Paralysis.....	5	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Partial Paralysis	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pulmonary Consumption	2	6	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..
Inflammation of Lungs	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Disease of Heart	2	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Chronic Dysentery .....	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2
Constitutionalexhaustion	2	7	..	..	..	..	..	..	1	5	..	..	..	..	..	..	..	..	..	..
Maniacal exhaustion ..	1	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..
Marasmus .....	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total.....	25	30	4	4	3	..	6	1	1	5	1	1	..	..	..	2	..	1	..	2

COUNTY OF KENT.

TABLE XIX.—ABSTRACT OF THE ANNUAL RETURNS MADE BY CLERKS OF UNIONS
OF LUNATICS ON JANUARY 1st, 1853.

NUMBERS RETURNED.							WHERE MAINTAINED.																			
UNIONS.	Totals.		Chargeable.				In the County Asylum.				In Licensed Houses or other County Asylums.				In the Union Houses.				In Lodgings.				With their Friends.			
			To the Contributing Parishes.		To the Local Jurisdictions.		From Contributing Parishes.		From the Local Jurisdictions.		From Contributing Parishes.		From Local Jurisdictions.		From Contributing Parishes.		From Local Jurisdictions.		From Contributing Parishes.		From Local Jurisdictions.		From Contributing Parishes.		From Local Jurisdictions.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Ashford, East . . .	3	5	3	5	0	0	3	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Ashford, West . . .	4	7	4	7	0	0	3	4	0	0	0	0	0	0	1	1	0	0	0	1	0	0	0	1	0	
Blean	3	8	3	6	0	2	3	6	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Bridge	3	12	3	12	0	0	2	5	0	0	0	1	0	0	1	4	0	0	0	0	0	0	0	2	0	
Bromley	7	7	7	7	0	0	7	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cranbrook	13	14	13	14	0	0	10	11	0	0	0	0	0	0	2	0	0	0	0	0	0	0	1	3	0	
Dartford	16	19	16	19	0	0	13	18	0	0	0	0	0	0	3	1	0	0	0	0	0	0	0	0	0	
Dover	8	20	3	6	5	14	2	5	3	6	0	0	2	5	1	1	0	2	0	0	0	0	0	0	0	1
Eastry	14	26	10	12	4	14	4	4	1	0	0	0	1	6	5	4	1	4	0	0	0	0	1	4	1	4
Elham	10	14	5	10	5	4	3	7	1	0	0	0	3	3	1	2	1	1	0	0	0	0	1	1	0	0
Faversham	10	14	10	14	0	0	2	3	0	0	3	6	0	0	3	4	0	0	0	0	0	0	2	1	0	0
Gravesend & Milton	4	16	3	12	1	4	0	9	1	4	1	1	0	0	1	1	0	0	0	0	0	0	1	1	0	0
Greenwich	54	74	54	74	0	0	32	58	0	0	0	0	0	0	22	15	0	0	0	0	0	0	0	1	0	0
Hollingbourne . .	11	12	11	12	0	0	8	7	0	0	0	0	0	0	1	3	0	0	0	0	0	0	2	2	0	0
Hoo	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0
Lewisham	13	16	13	16	0	0	9	12	0	0	0	0	0	0	4	3	0	0	0	0	0	0	0	1	0	0
Maidstone	27	27	13	12	14	15	5	4	10	12	0	0	0	1	5	5	4	2	0	0	0	0	3	3	0	0
Malling	15	14	15	14	0	0	10	11	0	0	0	0	0	0	4	0	0	0	0	0	0	0	1	3	0	0
Medway	20	32	15	26	5	6	6	21	2	5	0	1	0	0	9	4	1	1	0	0	0	0	0	0	2	0
Milton	3	7	3	7	0	0	3	0	0	0	0	1	0	0	0	3	0	0	0	0	0	0	0	3	0	0
North Aylesford . .	11	7	8	6	3	1	8	6	3	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Romney Marsh . . .	2	3	0	1	2	2	0	1	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	1	1
Sevenoaks	18	19	18	19	0	0	13	10	0	0	0	0	0	0	1	2	0	0	0	0	0	0	4	7	0	0
Sheppey	7	2	5	2	2	0	4	2	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	0
Tenterden	11	12	11	12	0	0	6	3	0	0	0	3	0	0	1	2	0	0	0	0	0	0	4	4	0	0
Thanet	21	13	7	3	14	10	4	2	2	0	1	1	8	7	2	0	4	2	0	0	0	0	0	0	0	1
Tunbridge	18	7	18	7	0	0	14	7	0	0	0	0	0	0	0	0	0	0	0	0	0	4	0	0	0	0
TOTALS	327	408	272	336	55	72	174	228	23	29	5	14	14	22	67	56	12	13	0	1	1	0	26	37	5	8
Totals on Jan. 1, 1852	291	389	241	326	50	63	147	218	18	22	5	16	13	15	62	55	13	16	0	1	1	0	27	36	5	10
Increase	36	19	31	10	5	9	27	10	5	7	0	0	1	7	5	1	0	0	0	0	0	0	0	1	0	0
Decrease	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	1	3	0	0	0	0	0	0	0	0
Net Increase	55		41		14		49				6				2				No change.				Decrease of 2.			

REMARKS ON THE TABLES.

TABLES 1 AND 2.—On the 1st of January last, the Kent Asylum had been opened for the reception and treatment of Patients during 20 years ; and, adding to this period the subsequent half-year, up to last Midsummer, for the more convenient use of the accompanying tables, 2010 Patients had been admitted. The two sexes were received in the proportion of about 25 men to 24 women. Notwithstanding the greater number of men thus admitted, the terminations of their cases in death and in recovery have been so much more numerous than in the cases of the women, that the latter have, perhaps, always preponderated in the number resident in the Asylum at any one time. The number of each sex remaining at the end of each of the last seven years has varied between 6 men to 7 women for the lowest, and 8 men to 10 women for the highest proportion. In the $20\frac{1}{2}$ years, 374 men against 270 women have died ; 316 men against 271 women have recovered.

In all ways of discharge, 778 men and 687 women have passed from under keeping and treatment. After deducting the cases remaining under care at the end of the whole period, the proportion of deaths to the cases disposed of in the $20\frac{1}{2}$ years, is 48·0 per cent. for men, 39·3 per cent. for women ; 43·9 per cent. for both sexes together. Thus, the mortality in women is nearly 9 per cent. less than that in men.

Proceeding, in the same manner, to estimate the rate of the recoveries, the proportion of them, in men, is 40·6 per cent., in women 39·4 ; in both together 40·0 per cent. In deaths and discharges on recovery, therefore, 83·9 per cent. of patients have disappeared : the remaining 16·1 per cent. have been dismissed, either relieved, or not improved.

The number now maintained in the Asylum is equal to considerably more than a fourth part of all who have been admitted.

Looking at the 2nd table, "Admissions of all years, &c.," it appears that considerably less than one-third of the whole were admitted in the first ten years, or moiety of the period : rather more than half in the first fifteen years ; and that, therefore, the admissions of the remaining $5\frac{1}{2}$ years nearly equalled in number those of the whole preceding period.

This is an astonishing increase, and requires some explanation. It must, by no means, be regarded as evidence of the absolute increase of Insanity, after allowing for the relatively small increase which may

be due to the growth of population. It is even doubtful whether the malady has undergone real increase at all; however ample may seem the grounds for supposing it, which present themselves in considering the multiplied excitements and heightened mental stimulation which characterize modern society. The increase is, probably, only apparent, and principally due to the more searching operation of the Lunatic Act of 1845, under which many cases of mental derangement and imperfection have been placed in the Asylum which would, before, have been suffered to remain more or less at large. This appears to be the chief explanation. The other causes that may be named are of a local character, as the temporary practice, adopted three years since, of admitting out-county and private patients, and the more permanent opening of our wards, at that time, to the use of the Corporate Jurisdictions of Kent. That a part of our accelerated growth should be due to the latter causes, at least, will excite no apprehension as to future increase; nor is the practice itself, of uniting all the pauper lunatics of the County in one Establishment, likely to be deemed other than a public advantage.

The fourth column of the 2nd table illustrates, to the extent of the results of the last year, the recoveries and deaths relatively to the years of confinement; and, so far, exhibits the prospects of cases as affected by their duration. Thus, of patients in confinement one year, almost five times as many recovered, and exactly twice as many died, as of patients in confinement the second year; and $2\frac{1}{2}$ times as many recovered, four times as many died after the second, as recovered and died after the third year.

Beyond the third year of confinement no patient recovered; but 16 died, amounting to scarcely $\frac{2}{7}$ ths of all the deaths, although patients of longer standing than the 3rd year constituted above $\frac{3}{7}$ ths of the entire number resident.

TABLE 3.—The number of patients remaining at the close of the last year (July 4th, 1853) is greater than the year before, and very nearly as great as two years previously, after the unprecedented admissions of 1850-1. In the three intervening years, 658 patients were received, 509 were discharged. The admissions of 1852-3 were less by 30 than in the preceding year, because it had been necessary to put a stop to the further admission of women from out-counties, and of female private patients. It became requisite, further, to cause the removal of all the out-county females already resident, in order to set at liberty the space for that sex, which could no longer be spared for strangers.

At the same time, the daily average of inmates was greater by $15\frac{1}{2}$ than in any previous year. The composition of the number remaining (July 4th, 1853) has become considerably changed in the course of the year; showing more patients from within the county, fewer from external sources; viz.—445 instead of 419, of parishes; 72 instead of 57 of corporate jurisdiction in Kent; on the other

hand, 9 in place of 34 belonging to other counties (two only being women), and 19 in lieu of 22 private patients. This year's recoveries are 37·4 per cent. on its admissions, against the 23·4 and the 33·0 per cent. of the two previous years.

The deaths are 10·4 per cent. on the daily average of patients, against the 14·0 and the 14·4 per cent. of the same antecedent periods. Prior to Midsummer 1850, the rate of deaths had been less, and of recoveries greater. The three years ended since that date have witnessed the entrance and the entire disappearance of the many out-county patients who were then received; so that, at the present time, the mortality and the results of treatment appear to be returning to their normal proportions. The deaths in 1849-50 were 10·5 per cent., the recoveries 39·6 per cent.; corresponding very nearly with the respective rates of the last completed year. The causes which had thus produced a temporary disturbance of our ordinary results, making them of a less favourable description, are easily discovered in the conditions of disease which those out-county patients, in general, presented.

In a proportion far greater than the common mixture of cases, did they present the incurable and fatal states and complications of Insanity; and the reason of this is evident, for those out-county parishes which availed themselves of our spare room did so under the great pressure they were suffering in consequence of their own Public Asylum not affording them even half the accommodation they required; and as they could, by no means, send all their surplus patients to this Asylum, they naturally and properly selected for that object only the most troublesome, dangerous, and dirty cases. And such would be, chiefly, and did consist of, paralytic, epileptic, and demented persons. From such cases, sent by tens at a time, no other effects could be anticipated but a rate of mortality increased, and one of recoveries largely diminished. During these three years, the Institution has been getting through a transition which, inasmuch as its character was the reverse of steady and gradual, was calculated to diminish the general peace, regularity, and comfort, and, therefore, was not beneficial. The following statement, with reference to so many of those out-county patients as were sent from the County of Middlesex, bears witness to the correctness of the foregoing remarks.

Particulars of the discharge of the 134 patients received from Parishes, chiefly Metropolitan, in Middlesex, between the 15th July, 1850, and the 14th August, 1851, a period of 13 months:—

Discharged recovered.....	34
Died.....	25
Removed to be placed in Middlesex County Asylums.....	74
Remains (having been transferred to a parish in Kent) ...	1

Total..... 134

With the exception of 4, the 34 patients who recovered had left this Asylum before the close of 1851. Therefore, in a year and a half, 30 only recovered out of 134; or, 22·4 per cent; and all but three of the 25 deaths took place before the end of the same year, and, consequently, 22 deaths in 134 persons occurred in the 18 months, being 16·4 per cent. In the years 1850-1 and 1851-2, therefore, the rates of recovery and of mortality were respectively reduced and augmented by these means, whilst the freedom of the year 1852-3 from similar exceptional circumstances, permitted a return to such results as had formerly prevailed.

There has been a slight diminution in the number of cases of re-admission; they have been $8\frac{3}{4}$ per cent of all admissions, instead of $9\frac{1}{2}$ per cent, as in the previous twelve months.

TABLE 4.—An examination of this table, in connection with table 19, shows that, in the last year, the corporate jurisdictions have availed themselves of the Public Asylum in a proportion rateably larger than the contributing parishes. They have sent 2-9ths of the parish patients admitted from Kent, whilst their returns show that they are chargeable with not more than 2-11ths of all the lunatics in the county.

TABLE 5.—It is to be regretted that it is still deemed necessary to send to the Asylum so many aged persons. In the year under review, 11 persons averaging 64 years of age, and 12 of from 72 to 75 years, were thus received. In many of these, the malady was simply decay of mind in advanced life, or was due to apoplectic seizures and attended by palsy. It is true, however, that such patients are sometimes noisy and troublesome to manage, but, for the most part, neither dangerous nor effectively violent; and they are not curable. Their state requires rather that kind of nursing which can be better given in Workhouses, where they would be few in number, and where they could be more easily made the objects of undivided attention, than they can under the mixed management of care and discipline which must prevail in Asylums, in consequence of the variety of the cases. They cannot, properly, be mixed with the general inmates of an Asylum because of their helplessness; and, for the same reason, they demand too large a share of that attention which is the common property of every ward or class. To a certain extent, these aged persons are kept apart; a practice which could not, however, be thoroughly observed without devoting a ward to their sole use. This would not be consistent with the limit of space, or, if an Asylum should be so amply commodious as to permit of it, the arrangement would still be proper to a Workhouse rather than to an Asylum.

TABLE 6.—Seventy-seven patients admitted, being either married or widowed, had families. Their children numbered 302, averaging nearly 4 in a family. Five unmarried women had each a natural child. Of the 171 persons, 116 could read and write, including

some of fair education ; 19 could read only, and 18 were unable to read. 124 were members of the Established Church.

TABLE 8.—The instances of presumably hopeless complication of the mental disorder with paralysis and epilepsy, were more numerous, being nearly $15\frac{3}{4}$ per cent of the cases admitted, whilst they constituted $14\frac{1}{2}$ per cent in the previous year. It is in this direction that the many admissions of aged persons influence unfavourably the results of treatment. They contribute nothing to the list of recoveries, but they augment the deaths ; and, in proportion to the number present, transform an Asylum into a Workhouse.

TABLE 10.—It seems to speak well for the promptitude and attention to the Lunatic Act of parish officers, that almost half the patients admitted had not been suffering their attacks of Insanity for so long a period as three months. Care in obtaining the early admission of patients is as wisely economical as it is humane. (See Tables 12 and 13).

TABLE 18.—The deaths of the year present the large proportion of half their number as having been due to Apoplexy, Paralysis, and Epilepsy ; affections of Organs of the Nervous System ; a fourth more to cardiac and pulmonary diseases ; a sixth to the general failure of vital power, independently of apparent local disease, partly in aged persons, from natural causes, and, for the rest, in persons of less advanced age, in whom the phenomena proper to fulness of years had been hastened by the wearing and weakening effects of long existing Insanity.

The 19th and last table, constructed from the annual returns of Lunatics of Unions in Kent, exhibits a general increase in number which is without precedent, and for which I am unable to discover a cause or explanation. The net increase of insane persons chargeable to Unions on January 1st, 1853, is 55, amounting to an addition of 8 per cent in the course of one year. The customary rate of increase, from year to year, had not been greater than that of population, as may be judged of by the subjoined statement:—

Returned, 1st January, 1849	..	628				
„	1850	.. 647	increase 19	being	3·02	per cent
„	1851	.. 659	„ 12	„	1·85	„
„	1852	.. 680	„ 21	„	3·18	„
„	1853	.. 735	„ 55	„	8·08	„

In former years, the annual increase was under an average 3 per cent. per annum ; but, on the last occasion, it was 8 per cent., and no explanation has as yet presented itself of the extra 5 per cent. Nineteen of the 27 unions share the increase, at rates varying between one twenty-seventh part, and three-fourth parts more than their last previous returns.

STATE OF THE ASYLUM, AND OCCURRENCES IN THE YEAR 1852-3.

Twelve months of the existence of a large Lunatic Asylum can hardly pass without accident and important change. With regard to the latter, there is always in an old establishment much that is susceptible of beneficial alteration, and which requires adapting to the opinions of the day. A brief review of the occurrences under each of these heads will form a necessary branch of this report.

The accidents to patients have consisted of 4 fractures and 2 dislocations; these were accidentally met with, through inattention or carelessness on the part of the subjects of them, with one exception wherein a man's arm was broken in parrying a blow received whilst fighting with another male patient. One case of sudden death occurred, and became the subject of a coroner's inquest. The patient, a man 58 years of age, dropped down, very suddenly, whilst dressing himself in the morning, and died. On examination, his heart was found to be enormously enlarged, and the valves of it were so extensively diseased and altered in shape, as to make it surprising that they should have so long sufficed for the performance of their highly important functions.

An attempt at suicide was made by a male patient whilst engaged at farm work; he wounded himself in the throat with a hay-knife, making a large cut, but it was superficial only, and not attended with danger to life.

Eight persons effected their escape, and were retaken, generally after short absences of not more than a very few hours. One of these, a man (a patient from gaol) broke his cast-iron window-frame in the night, and let himself down from his room on the first floor with a sheet. A second man escaped under a very peculiar combination of circumstances, late one evening in January, and, owing to the darkness which defeated the pursuit, remained out in woods and open places all night, being almost in a state of nudity. He was retaken next morning, and subsequently escaped all the effects of cold which were anticipated in consequence of his exposure.

All the other escapes were made by the patients when at work on the farm; not a difficult matter, as we have no boundary wall, whilst our land is bordered, on one side, by a dense wood.

In the autumn of 1852, all the female patients belonging to other counties were removed, to make room for the steadily increasing demand of our own female patients. The relief thus obtained not being enough, a plan shortly received the sanction of the visitors for surrendering two of the men's wards to the women. The Asylum buildings had been designed to receive an equal number of patients of each sex, whilst, of late years, a considerable excess of

women has prevailed, latterly subsiding into a constant ratio of 11 women to 9 men, and promising to be permanent. One consequence of the above plan is the complete occupation of the additional Asylum, of which a fourth part had been untenanted. Thus, in little more than 3 years after its opening, the whole of that large addition to the establishment is fully occupied, and there remains not more than a needful number of vacancies for each sex for future use. It became necessary, in the course of the year, on account of the more troublesome and dangerous description of some of the patients, to apply to the visitors for two extra attendants, and the application was immediately granted. The duties of these are limited to attendance on certain wards, containing patients of the more unmanageable class.

A considerable number of new books, of an amusing and instructive character, chosen from the extensive list of works published under the sanction of the society for Promoting Christian Knowledge, has been added to those previously, and from time to time, provided for the patients.

These are circulated according to the taste of the patients, who choose works as they wish for them, from a printed catalogue displayed on a large sheet, a copy of which is hung up in every ward.

New workshops for tailors and shoemakers have been erected in a convenient situation near the other shops. Previously, these trades had been carried on in the wards; this was found to be inconvenient, and, so far as regarded the shoemaking, dirty and offensive in smell, as well as unsafe from the near access of patients not employed to the place where the manufacture was carried on. A large amount of work has been done by patients in making and mending in the course of the year.

A valuable addition, now in progress, is the erection of covered ways outside the centre wings, at the back, giving passage, under shelter, to a central point on each side. The evil of making some wards serve as passages from the centre and offices to the rest had long been felt. It is now about to be remedied by these means. Another improvement consists in admitting light into some dark passages, which were calculated to produce an unfavourable impression as to the lightness and cheerfulness of the wards themselves, upon strangers, friends of patients and others, entering the Asylum.

RESTRAINT.—Personal restraint, worn by patients, has been used this year in two cases, one of a male, the other of a female. In the man, who was suffering from Paralysis and whose general faculties were greatly impaired, a pustular eruption, with wide spreading inflammation, had broken out over a large surface of the face and neck. It was doubtless attended by great itching. The patient incessantly scratched the parts until he had brought the whole into a state of general ulceration. To prevent this, and

afford the possibility of reparation, a strait waistcoat was used to restrain his arms, for two weeks, during which the disease became healed. The waistcoat was then discontinued. In one day, however, the patient had scratched the new and tender skin, destroyed it, and reproduced the ulcers. The waistcoat was, therefore, re-applied and continued for four weeks: at the end of that time perfect healing had taken place, and no return of the disorder followed.

The female patient wore a glove, fastened at the wrist, on her right hand, every night for four weeks, on the first occasion. It was disused for a fortnight, then re-applied and continued for twelve weeks. The intention was, by this means, to frustrate her open and invincible inclination to commit suicide. She slept in a room with another patient and, nevertheless, pursued without secrecy her fatal determination. It was not until after unmistakeable warnings of her intention, and a strict but fruitless observance of other preventive means, that it was found necessary to deprive this patient of the assistance of her right hand, in the way described. From the strongest materials we possess, which alone were permitted to be used for her clothing and coverings, she had constructed the means wherewith to strangle herself; and, but for great vigilance, her application of them might have been successful. At last, it became evident that, in the absence of some preventive deserving of the fullest reliance, she would eventually accomplish her destruction. The glove appeared to be such an instrument of prevention. In the meantime, such medicinal treatment was adopted as might remove the suicidal propensity. The long period of twelve weeks is the time which elapsed before a marked change of symptoms was brought about; the fortnight, during which the glove had been laid aside, corresponded with the length of a temporary improvement of mind, and disappearance of the suicidal tendency.

The customary entertainments have been given to the patients, as in former years. These now form objects of regular and pleasurable anticipation, and it is impossible to doubt that they afford both general and considerable enjoyment in the act of their performance.

The two sexes have always been allowed to intermix on these occasions with freedom, and there has hitherto arisen no cause to regret this liberty, or to complain of unbecoming conduct in consequence.

In conclusion, I am happy to report that a good state of health has again been enjoyed by the patients; there has been an entire freedom from any epidemic, endemic, or other spreading disorder, and I know of no circumstance in the condition of the Asylum forbidding the hope of enjoying a similar immunity in the future.

JAMES E. HUXLEY, M.D.,

SUPERINTENDENT.